

**STATE OF VERMONT
ACTIVE PREMIUMS
BI-WEEKLY**

EFFECTIVE 1/1/2009

TOTAL CHOICE PLAN PLAN

CLASS CODE	TOTAL PREMIUM	STATE SHARE	EMPLOYEE SHARE	DEFINITION
01	\$305.18	\$244.14	\$61.04	One Person
1A	\$610.37	\$488.30	\$122.07	Two Person
1B	\$839.26	\$671.41	\$167.85	Family

SELECTCARE POS PLAN

CLASS CODE	TOTAL PREMIUM	STATE SHARE	EMPLOYEE SHARE	DEFINITION
01	\$255.42	\$204.34	\$51.08	One Person
1A	\$510.83	\$408.66	\$102.17	Two Person
1B	\$702.39	\$561.91	\$140.48	Family

HEALTHGUARD PPO PLAN

CLASS CODE	TOTAL PREMIUM	STATE SHARE	EMPLOYEE SHARE	DEFINITION
01	\$273.73	\$218.98	\$54.75	One Person
1A	\$547.47	\$437.98	\$109.49	Two Person
1B	\$752.77	\$602.22	\$150.55	Family

SAFETYNET PLAN

CLASS CODE	TOTAL PREMIUM	STATE SHARE	EMPLOYEE SHARE	DEFINITION
01	\$178.95	\$143.16	\$35.79	One Person
1A	\$357.90	\$286.32	\$71.58	Two Person
1B	\$492.11	\$393.69	\$98.42	Family